LS-ESH-PRM-0.1.0 Attachment 2 06/24/02

MINOR STUDENT AUTHORIZATION TO WORK IN CONTROLLED AREAS AT THE NSLS OR SDL (for individuals under 18 years of age and for dose levels ≤ 25 mrem/yr.)

This form is to be completed by the student-s sponsor and NSLS personnel. Completing this form provides the NSLS with the information needed to review job requirements for minors working at the NSLS. ALL MINORS MUST COMPLETE THE NSLS SAFETY ORIENTATION BEFORE WORK BEGINS ON THE EXPERIMENTAL FLOOR.

STUDENT: Social S	ecurity #	:			Life/G	uest #:			
Last Name:			First	Name:					
Home Phone: ()			Date	e of Birth:					
Parent/Guardian Name &	Signature	e:				Date:			
High School:Na									
Na	me		Address			Phone No.			
SPONSOR:			SUP	ERVISOR A	AT TH	E NSLS OR SDL			
(BNL Program, School, Institution, staff, user)									
Name:				Name:					
Address:				Lab Extension:					
Phone: ()			Signa	ature:		Date: _			
Description(Continue on next page if needed						to			
WILL THE STUDENT BE									
•		□ N □ N	Carcinogens	□ Y		Magnetic Fields ≥ 600 g.	ПΥ		
		⊃ N ⊃ N	Toxics or Teratoger Biohazards	nics □ Y □ Y		Cryogens	□ Y		
-		⊐ N	Electrical Hazards (□N			
Approvals:									
RCD Facility Support Representative Date NSLS ALARA Committee Chair Date				Original returned to: Eileen Morello, Bldg. 725B, and Forwarded to: L. Barry, Bldg. 185 (HR) Copies sent to: Personnel Monitoring (Rich Reciniello, Bldg. 535A); Health Physics Technical Support Group (Henry Kahnhauser, Bldg. 120); Education Office (Brian Murfin, Bldg. 438)					
NSLS Chairman (or designe	e)	Date	<u> </u>						

LS-ESH-PRM-0.1.0 Attachment 2 06/24/02

MINOR STUDENT AUTHORIZATION TO WORK IN CONTROLLED AREAS AT THE NSLS OR SDL

ACTIVITY - continued: